

## STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

## **DISCLOSURE REPORT** NONCANDIDATE COMMITTEE



PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSE	RE REPORT CAN BE F	OUND IN THE "GUIDEBOOK	FOR NONCAN	DIDATE COMMITTEES.")
SECTION I-NONCANDIDATE COMMITTEE: SECTION II-TYPE OF REPORT:				
(a) Committee Name: DTRIC Insurance Co., Ltd./	(See the Schedule of Reporting Dates to complete this section)			
Royal State Financial Corp. Non-Candidate Committee	[ Prelimi	CAMPAIGH SELNOIMC  [✓] Preliminary Primary C(1) Amended		
(b) Mailing Address: 1600 Kapiolani Blvd., Ste. 1520	[ ] Final Primary [ ] Short Form		orm	
Honolulu, Hawaii 96814	[ ] Prelimir	nary General 6 US 19 REPORTING PERIOD		
(c) Phone (Bus) (808) 951-1712 (Res)	[ ] Final Ele	ection Period 0	1/01/06	through 09/01/06
Treasurer's	[ ] Suppler	nental KAT	d Time 18 Time	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS (Complete Section III (Part 2) on the Second Half of this Form Before Completing This Section)  COLUMN A  COLUMN B  ELECTION PERIOD  TOTAL THIS PERIOD  TOTAL TO DATE				
Cash on Hand at the Beginning of the Election Period (Continuing Committee) OR at the time the Organizational Report was Filed (New Committee)				0.00
2. Cash on Hand at the Beginning of this Reporting Period	************		0.00	
3. Total Receipts (From Line 11, Column A and B)		······································	0.00	5,250.00
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)			0.00	5,250.00
5. Total Disbursements (From Line 14, Column A and B)			0.00	5,250.00
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B)			0.00	0.00
SECTION III (Part 2)-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS (If Necessary, Complete Schedules A through D Before Completing This Section) RECEIPTS				
. Monetary Contributions of \$100 or Less			0.00	0.00
8. Non-Monetary Contributions of \$100 or Less			0.00	0.00
. Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule A, Line 2 for Column A)		0.00		5,250.00
10. Other Receipts (Schedule D, Line 2 for Column A)		0.00		0.00
11. Total Receipts (Add Lines 7 through 10 for Columns A and B)	*************		0.00	5,250.00
DISBURSEMENTS				
12. Contributions To Candidates (Schedule B, Line 2 for Column A)	*********		0.00	5,250.00
13. Expenditures (Schedule C, Line 2 for Column A)			0.00	0.00
14. Total Disbursements (Add Lines 12 and 13 for Columns A and B)			0.00	5,250.00
I hereby obvity the the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.				
Committee Chairperson Signature Date	Treasurer(Sig	<del>/</del>		Date

Date Form NC-3 (Rev. 11/97)